

MCKINNEY-VENTO HOMELESS ASSISTANCE DISPUTE RESOLUTION FORM

School District _____ Liaison _____

Telephone _____

Date of first contact by homeless individual, guardian, or representative _____

Homeless Student's Name _____

Describe the issue(s) in question _____

School District Contact _____ Telephone _____
(Superintendent/Principal)

Date _____ (within 7 business days)
Resolution at Liaison/School District Level (*describe below*) _____ or
Forwarded to OPI Homeless Coordinator [*please contact at (406) 444-2036*] _____

Date _____ (within 15 business days)
Resolution at OPI Homeless Coordinator Level (*describe below*) _____ or
Forwarded to Superintendent of Public Instruction _____

Describe Resolution Results _____

Homeless Coordinator Signature _____

This form must be filed with

Heather Denny,
Homeless Coordinator
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501